

TranspARTation Grant Application Form

To apply for a TranspARTation grant, please complete the following application form and email to the address below. All fields are required unless otherwise noted. [Download this form to your computer then open & complete this form in Adobe Reader.](#) Do not use the web browser or Mac Preview.

Applicant Information

School Name:	
School District:	
Street Address:	
Street Address 2:	
City, State, Zip:	
County:	

Person Completing the Application

Name:		Phone:	
Title:		Fax:	
Email Address:			
How did you hear about this grant opportunity?			

School Principal

Name:		Phone:	
Title:		Fax:	
Email Address:			

School District Financial Representative

Name:		Phone:	
Title:		Fax:	
Email Address:			

Project Information

Date of Arts Event:			
Arts Event Name:			
Venue or Organization Students will visit:			
Street Address of Arts Event:			
City, State & Zip of Arts Event:			
Estimated Number of Students to attend Arts Event:		Estimated Number of Adults to attend Arts Event:	

Purpose of the Trip

In the narrative box below, briefly describe:

- How you plan to integrate this trip into the students' broader curricular experience, and
- What you hope the students will gain from this trip

Total estimated transportation cost (include written estimate/quote from transportation provider):

Amount requested (Request cannot exceed estimated transportation costs [i.e., buses, fuel, parking, tolls] or \$300, whichever is less). Actual grant award will be calculated based on transportation receipts received with the final report and will not exceed the pre-approved grant award.

Financial Need

Does your school receive Title 1 funding? Yes No

If yes, what percentage of your student population is eligible for free or reduced lunch? _____

Has this school previously received a TranspARTation grant? Yes No

If yes, when was the grant received (month and year)? _____

By typing my name in the box below, I certify that I am legally authorized to submit this application on behalf of the grantee (school) and that the foregoing statements are true and complete to the best of my knowledge:

Authorized Signature

Title

Date

Email to: Sheila.Ross@state.de.us

1. Completed Application
2. Copy of transportation estimate/quote from transportation provider